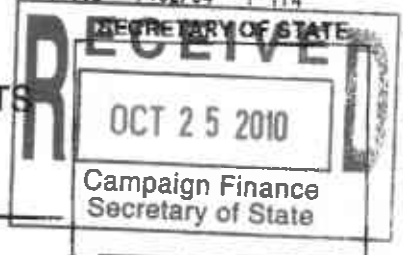


**Judicial Candidate  
REPORT OF RECEIPTS AND DISBURSEMENTS  
2010 Judicial Election**



Name of Candidate Douglas MacArthur Magee  
Address 145 E. Maud Ave. Mendenhall, Ms. 39114 County Simpson  
Telephone Work 601-847-2446 Home 601-847-2446 Fax 601-847-7388  
Contact Name Douglas M. Magee Email Address dmagee61@yahoo.com  
Office Sought Chancery Court Judge, Post One 13th Judicial District Ms.  
☐ Check here if above is different from previous report

- May 10, 2010 Periodic Report (January 1, 2010, through April 30, 2010).....Mandatory  
     June 10, 2010 Periodic Report (May 1, 2010, through May 31, 2010).....Mandatory  
     July 9, 2010 Periodic Report (June 1, 2010, through June 30, 2010).....Mandatory  
     October 10, 2009 Periodic Report (July 1, 2010, through September 30, 2010).....Mandatory  
  X   October 26, 2010 Pre-Election Report (October 1, 2010, through October 23, 2010).....Mandatory  
     November 16, 2010 Pre-Runoff Report (October 24, 2010, through November 13, 2010).....Runoff Candidates  
     January 10, 2011 Periodic Report (October 1, 2010, through December 31, 2010).....Mandatory  
     Termination Report (Candidate will no longer accept contributions or make campaign expenditures and has no outstanding campaign debt obligation) Required to terminate reporting obligations

**IMPORTANT**

- (1) Pre-Election reports are mandatory, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (Zero) for total amount of reported contributions and expenditures during this period.  
(2) Until a Candidate files a Termination Report, annual and periodic reports must still be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).  
(3) The receiving authority must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline. Faxed reports are acceptable.

**REPORTED CONTRIBUTIONS AND DISBURSEMENTS**

	Itemized + Non-itemized =	This Period	Calendar Year-To-Date
Total amount of contributions	\$ 0 + \$ 0	\$ 0	\$ 0.00
Total amount of disbursements	\$ 1,822.46 - 0.00	\$ 1,822.46	\$ 2,562.46
Total amount of cash on hand		\$	

I certify that I have examined this report and to the best of my knowledge and belief, it is true, accurate, and complete.

Signature of Candidate

Date

Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et seq. for statutory requirements.

Penalties: Failure to submit required reports, or failure to submit reports in accordance with statutory deadlines, or failure to submit valid reports shall result in fines of \$50 per day and/or prosecution in accordance with Miss. Code Ann. §§ 23-15-811 and 813 (1972).

SEND TO: 1. Candidates for Statewide, State district, multi-county and all legislative offices should return form to Secretary of State, Elections Division, P. O. Box 136, Jackson, MS 39208 or fax to 601-358-1499 or 601-576-2819.  
2. Candidates for countywide and county district offices should return forms to their county Circuit Clerk.

Name of Candidate or Committee Douglas M. MageeReporting period October 1, 2010 through October 23, 2010

## ITEMIZED DISBURSEMENTS

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Simple Print		
Mailing Address		\$
3433 Broadway St. NE	10/1/10	367.46
City, State, Zip Code		\$
Minneapolis, MI 55413		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
		367.46
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Campaign Flyers		
Postmaster		
Mailing Address		\$
	10/5/10	44.00
City, State, Zip Code		\$
Mendenhall, Ms. 39114		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
		44.00
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Postage		
Simpson County Impact		
Mailing Address		\$
P. O. Box 187	10/8/10	125.00
City, State, Zip Code		\$
Raleigh, Ms. 39153		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
		125.00
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Press Release		
Prentiss Headlight		
Mailing Address		\$
P. O. Box 1257	10/8/10	130.00
City, State, Zip Code		\$
Prentiss, Ms. 39474	10/21/10	150.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
		380.00
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Press Release		
News Commercial		
Mailing Address		\$
P. O. Box 1299	10/8/10	105.00
City, State, Zip Code		\$
Collins, Ms. 39428		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
		245.00
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Press Release		
Taylorsville Post		
Mailing Address		\$
P. O. Box 100	10/10/10	125.00
City, State, Zip Code		\$
Taylorsville, Ms 38168		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
		125.00

Name of Candidate or Committee Douglas M. WageeReporting period October 1, 2010 through October 23, 2010

## ITEMIZED DISBURSEMENTS

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Smith County Reformer</u>		
Mailing Address		
<u>P. O. Box 187</u>	<u>10-18/10</u>	\$ 199.50
City, State, Zip Code		
<u>Raleigh, Ms. 39153</u>	<u>___/___/___</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
<u>Press Release</u>		324.50
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Lawrence County Press</u>		
Mailing Address		
<u>P. O. Box 549</u>	<u>10-18/10</u>	\$ 157.50
City, State, Zip Code		
<u>Monticello, Ms. 39654</u>	<u>___/___/___</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
<u>Press Release</u>		282.50
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Simpson County Publishers</u>		
Mailing Address		
<u>P. O. Box 338</u>	<u>10-18/10</u>	\$ 200.00
City, State, Zip Code		
<u>Maqee, Ms. 39111</u>	<u>10-18/10</u>	\$ 219.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
<u>Press Release</u>		669.00
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		
City, State, Zip Code		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		
City, State, Zip Code		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		
City, State, Zip Code		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$